

04-2-01

CD

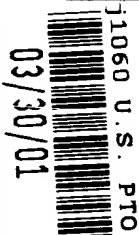
A

Knobbe Martens Olson & Bear LLP

Intellectual Property Law

550 West C Street
Suite 1200
San Diego CA 92101
Tel 619-235-8550
Fax 619-235-0176
www.kmob.com

James J. Mullen, III, Ph.D.
jmullen@kmob.com



Assistant Commissioner for Patents
Washington, D.C. 20231

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Attorney Docket No. : SALKINS.012CP1

Applicant(s) : Chory et al.

For : RECEPTOR KINASE, BIN1

Attorney : James J. Mullen III, Ph.D.

"Express Mail"

Mailing Label No. : EL 842 759 669 US

Date of Deposit : March 30, 2001

I hereby certify that the accompanying

Transmittal; Specification in 52 pages; 6 sheets of drawings; Sequence Submission in 1 page; Sequence Listing in 10 pages; Compact Disk (CD) with data identical to the Sequence Listing; Check for Filing Fee; Return Prepaid Postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.


Carol Macarty

S:\DOC'S\JIM\JM-5731.DOC 033001

Newport Beach
949-760-0404

San Francisco
415-954-4114

Los Angeles
310-551-3450

Riverside
909-781-9231

ASSISTANT COMMISSIONER FOR PATENTS

WASHINGTON, D.C. 20231

ATTENTION: BOX PATENT APPLICATION

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **Joanne Chory and Li Jianming**For: **RECEPTOR KINASE, BIN1**

Enclosed are:

- (X) 6 informal sheet(s) of drawing.
- (X) Sequence Submission in 1 page; Sequence Listing in 10 pages; Compact Disk (CD) with data identical to the Sequence Listing in the application.
- (X) The CD was prepared on an IBM-PC, using MS-Windows, and has 1 file entitled, "SEQLIST.TXT," of 94 kbs, and was created on 03/20/01.
- (X) Return prepaid postcard.

The present application qualifies for small entity status under 37 C.F.R. § 1.27. The fees are calculated below:

CLAIMS AS FILED				
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee			\$355	\$355
Total Claims	12 - 20 -	-0- ×	\$9	\$-0-
Independent Claims	2 - 3 -	-0- ×	\$40	\$-0-
If application contains any multiple dependent claims(s), then add			\$135	\$-0-
TOTAL FILING FEE		\$355		

- (X) A check in the amount of \$355 to cover the filing fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, now or in the future, or credit any overpayment to Account No. 11-1410.
- (X) Please use Customer No. **20,995** for the correspondence address.

James J. Mullen III, Ph.D.
Registration No. 44,957
Attorney of Record